

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Serge HAUMONT

Serial No.:

09/980,657

Filed: February 15, 2002

For:

New Method for Checking the Data

10/17/2006 HDENESS1 00000038 09980657

02 FC:1252

330.00 OP

Examiner: Lipman, Jacob

Group Art: 2134

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

October 12, 2006

(Date of Deposit)

Alphonso A. Collins

Signature

October 12, 2006

Date of Signature

PETITION FOR EXTENSION OF TIME UNDER 37 C.F. R. § 1.136(a)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

- [x] This is not the first request for an extension of time relative to the outstanding paper. The period for response has already been extended by one-month by petition dated August 31, 2006. Please extend the time for response by an additional one-month. With this extension, the deadline for filing the required paper will be October 12, 2006. A check for the additional extension fee of \$330 is enclosed.
- [X] Please charge any additional fees, or credit any overpayment, to Deposit Account No. 03-2412. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

COHEN, PONTANI, LIEBERMAN & PAVANE LLP

By

Alphonso A. Collins

Reg. No. 43,559

551 Fifth Avenue, Suite 1210

New York, New York 10176

(212) 687-2770

Dated: October 12, 2006



Attorney Docket No.: 4925-160RCE

FILING FEE COMPUTATION SHEET

Submit an original and a duplicate for fee processing

Dated: October 12, 2006

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In re RCE Application of: Serge HAUMONT For: New Method for Checking the Data

Parent Serial No.: 09/980,657

The filing fee has been calculated as shown below:

FOR:	Col. 1	Col. 2	SMALL ENTITY		LARGE ENTITY		
	# FILED	# EXTRA					
BASIC FEE				\$395		\$790	
TOTAL CLAIMS	- 20 =		x 9 =	\$	x 18 =	\$	
INDEPENDENT CLAIMS	- 3 =		x 44 =	\$	x 88 =	\$:
MULTIPLE DEPENDENCY			+\$150 =	\$	+300	\$	٤,
The fees below app originally filed clair	•	are added tha	at exceed the i	number o	of the		
Claims in excess of originally filed claims		x 25 =	\$	x 50 =	\$		
Claims in excess of originally filed claims		x 100 =	\$	x 200 =	\$		
Multiple Dependency if added and not paid in parent		+\$180 =	\$	+360	\$.		
			TOTAL:	\$		\$790	